

KATHY HOCHUL
Governor

KERRI E. NEIFELD Commissioner **ROGER BEARDEN, J.D.**Executive Deputy Commissioner

March 25, 2022

Psychiatric Services – Western NY DDSOO – IFB WN 040622

Questions and Answers:

Below is a compilation of the questions received for this bid. Questions that were repeated, or of a recurring nature, were consolidated. Thank you very much for your interest.

1. **Question:** Will you consider an electronic submission?

Answer: No. As stated in IFB WN 040622, Proposals should be **mailed**, or **hand delivered** to the address provided.

2. **Question:** Can a locum tenens agency bid on this solicitation?

Answer: OPWDD is not looking for Locum Tenens or Temporary services. OPWDD is looking for a qualified treatment provider who can commit to the full term of the contract.

3. **Question:** Can language changes be made?

Answer: No. Contractor must accept the terms of the agreement as written.

4. **Question:** If awarded, should there be contract terms we are unable to accept, is there a penalty for not signing a contract? Example: monetary damages.

Answer: No, there is no penalty for not signing a contract. A sample contract was posted with the IFB for potential bidders review of our terms.

5. **Question:** By submitting a response, are we automatically agreeing to a contract and its terms? Or if there are terms & conditions we cannot agree to; can we decline the contract if awarded?

Answer: No. A sample contract was posted with the IFB for bidders to review our terms. The contract terms and conditions will not be modified. If you have exceptions to the terms and conditions, you should not submit a bid.

6. **Question:** What was last year's spend for these services for this contract?

Answer: This will be the first contract with these Qualifications and Scope of Work, and as a result there is no comparable contract.

7. **Question:** Are candidates required with our proposal?

Answer: Yes, the Treatment Provider's resume, and other documents are required at the time the bid is submitted. Please refer to the requirements on the Cost Proposal Form on Page 21 of IFB WN 040622.

8. **Question:** Are there penalties incurred if unable to fill any of the openings?

Answer: This contract is to provide the services as set forth in the Scope of Work, and to do so on a regular basis. Failure to provide full coverage may result in contract termination.

9. **Question**: Is there an incumbent and current contract for this service? If so, can you please provide the vendor's name and current contract rate?

Answer: No. This will be the first contract with these Qualifications and Scope of Work.

10. **Question:** Will you allow multiple physicians to fill the need or are your requiring that one physician fulfill the need?

Answer: OPWDD is looking for a qualified treatment provider who can commit to the full term of the contract.

11. **Question:** How many hours will the provider spend at each facility every week?

Answer: As stated in IFB WN 040622, The hours of service will be scheduled between normal business hours of 7:00 am to 7:00 pm, Monday through Friday, except for NYS recognized Holidays, as mutually agreed upon between the OPWDD Region I Medical Director and the contractor. The number of Estimated Annual hours provided is an estimate only. There is no guaranteed minimum number of hours. Payment will be made based on actual services rendered.

12. **Question:** Will price adjustments be allowed for the renewal years? Can we submit a rate increase with each option year?

Answer: Please refer to IFB WN 040622, Page 4, Section 9. Payment, for information regarding CPI price adjustments.

13. **Question:** Do you want an all-inclusive rate?

Answer: Yes.

14. **Question**: Locum tenens physicians are Independent Contractors and as such are not employees. Therefore, Worker's Compensation insurance would not be applicable. Will you waive these requirements for physicians?

Answer: If the physician is accepting the position as an independent contractor and has no employees, they will need to provide a Worker's Compensation Certificate of Exemption.

15. Question: Will you consider \$1M per occurrence/\$3M aggregate insurance limits?

Answer: The insurance requirements are not negotiable.

16. **Question:** What is the expected time for the completion of credentialing for an accepted candidate?

Answer: All credentials will be verified prior to awarding a contract.

17. **Question:** Are background screenings required? Will the facility be handling this requirement or are you expecting the vendor to complete?

Answer: OPWDD conducts their own internal background screenings on treatment providers who contract with us directly.

Staffing agencies who are submitting treatment providers as candidates must become approved Registered Providers with OPWDD and contracts will not be submitted to OSC prior to this approval. For more information about becoming a Registered Provider, please visit:

https://opwdd.ny.gov/providers/service-providers/registered-provider-list . Approved Registered Providers are responsible for completing background screenings as listed in the Registered Provider application.

18. **Question:** Will telehealth be considered?

Answer: No.

19. **Question:** Is this mainly an adult population?

Answer: This service is for an entirely adult population.

20. Question: It appears that services are requested every other week. 192 hrs.

Answer: The number of Estimated Annual hours provided is an estimate only. There is no guaranteed minimum number of hours. Payment will be made based on actual services rendered.

21. **Question:** Only a Psychiatrist can perform these services not a PNP?

Answer: As stated in IFB WN 040622, Scope of Work, Section A.1.The Treatment Provider must be a Board Certified or eligible Psychiatrist.

22. **Question:** Are you doing things virtually and is this allowed, or everything is in person?

Answer: This service is to be fulfilled in person. As stated in IFB WN 040622, Scope of Work, Section B.5.Said service to be provided at 1200 East and West Road, West Seneca, NY 14224 as part of the NYS OPWDD WNYDDSOO Article 16 Clinic and other OPWDD sites as mutually agreed upon.

Respectfully,

Shannon Collings

Shannon Collings, CMS 2, Contract Management Unit (845) 877-6821x3281 (845) 877-3044 (fax) shannon.l.collings@opwdd.ny.gov